ر بر المار الم								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								423 gol ⁹ 12 <i>0</i> 54					
CLAIMS AS FILED - PART I							SI	SMALL ENTITY			OTHER THAN		
<u></u>			(Columi	n 1)	(Column 2)			TYPE		OF SMALL ENTI			
TOTAL CLAIMS			00					RATE FE			RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	BASIC FEE 355.00		ÓЯ	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			60 minus 20=		. 40			X\$ 9=		OR	X\$18=	720	
	DEPENDENT C	6 minus 3 =		3			X40=		OR	X80=	240		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+135=		OR	+270=	2 10	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1670		
CLAIMS AS AMENDED - PART II											OTHER		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 40	Minus	6	0	=6		X\$ 9 =		QB	X\$18=		
	Independent	· 9	Minus		1	Û		X40=		OR	X80=		
_	rino i rnese	NTATION OF M	ULTIPLE DE	PENDENI	CLAIM			+135=		OR	+270=		
							L	TOTAL			TOTAL		
	(Column 1) (Column 2) (Column 3)						AD	DIT. FEE	<u> </u>	10.1	ADDIT. FEE		
AMENDMENT B		CLAIMS		HIGH	EST				ADDI-	1 1		ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	AITATION OF ME	Minus	···	C1 4114	=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=		
400								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								D11. FEE					
SEN EN		CLAIMS REMAINING AFTER AMENOMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA	٦	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	5	(\$ 9=		OR	X\$18=		
	Independent		Minus	***		-							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							K40=		OR	X80=		
• 44	* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.									OR	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE													
7	he Highest Num	mber Previously Pa ber Previously Pak	For (Total or	S SPACE is Independe	i less that nt) is the	n 3, enter "3." highest number			propriate box				